

<b>INSURANCE</b>		<b>CC</b>		<b>LKK IDAC</b>	
INS CASE OWNER:		CC # 1801		LKK IDAC	
Surveyor:		DOE		Date / Time:	
Pre-assign / CCU / FTR		ASSIGNMENT		Registered in Meriton:	
Insured Vehicle No.		Claim No.			
Name of Insured		Policy No.			
Insured Tel No.		Make / Model :			
Excess Sec II :SS		D.O.A. :		Place of Accident :	
Is driver the owner? YES / NO		Nature of Accident :			
If NO, Driver Name / Age		UL CIA REPORT: YES / NO		TP CIA REPORT: YES / NO	
Driver Tel No. :		Insured Liability		Final ? Yes / No	
SH 8097B					
INSRS: WSP: Tel: Liability: RMKS:		INSRS: WSP: Tel: Liability: RMKS:		INSRS: WSP: Tel: Liability: RMKS:	
Date/Time		STAGE		DATE/PIC	
6/8/18		New Reporting Ir (1st)			
THN		New Reporting Ir (2nd)			
		New Reporting Ir (Final)			
		Notification Ir (if non-pickup)			
		Call OI			
		After call Ir in OI			
		Documentation Check List: Handler Typist			
		Notification Ir (if non-pickup)			
		After call Ir in OI			
		Authorisation To Act			
		Release Voucher			
		Final Repair Bill			
		Car Rental Invoice			
		Drawing Invoice			
		UL CIA			
		Medical Bill			
		PHE			
		Mandate/Reject Instruction			
		LOI			
		Payment Breakdown Form			
		Post-Repair Photos			
		Others			
<b>PRELIMINARY ADVICE</b>		Date/Time:		Sent by:	
<b>FINALIZATION</b>		Date/Time:		Confirm with:	
Repair Cost:		\$5		Reduction:	
<b>FINAL SETTLEMENT</b>		Date/Time:		Confirm with:	
Final Liability:		\$		(Agreed / Disputed) BOLA SYN No.:	
Repair Cost:		\$		Days:	
Loss of Rental (LOR):		\$		Days:	
Loss of Use (LOU):		\$		Days:	
Loss of Income (LOI):		\$		Days:	
LOR only		LOU only		LOR + LOU	
GLA/LTA Search		Medical		Disbursement	
Legal Cost		Total:		Global Sum SS:	
<b>FINAL PAYMENT</b>		Date/Time:		Confirm with:	
Payee 1:		Payee 2:		Payee 3:	

WARRANT

Kalam

REF:

AXA

# ASSIGNMENT

From:

Date:

30/7/2018

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No:

SH 8097B

at Workshop no:

Comfort Delgro

at:

59 Loyang St

Insured:

Policy No:

Claims No:

Sum Insured:

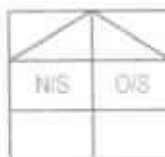
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

QA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

2

days

Res:

Yes or No

Lump Sum:

20

%

3 Val

Yes or No

CA / REV / REP / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Ins No:

SH 8097B

Vt Regn:

"Zy 213

Type: M/Car / M/Cycle / Bus / Van / Lorry / T/O / Prime Mover /

Truck / Trailer or

Make:

Hyundai Santa Fe

CC:

1991

Colour:

Blue

A/C:

Insured

Std / NI / NA

Sp Reading:

576566

T/Radio:

Insured

Std / NI / NA

Eng/No:

C/No:

KMHETKIVMDA835339

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/60R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Wairiki

Front:

Rear:

R/Bal:

7

mm

R/Bal:

7

mm

L/Bal:

7

mm

L/Bal:

7

mm

D.O.A:

27/7/18

D.O.I:

2/2/18

Survey held at:

CDHE (Lg)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear

The U/C / Chassis frame / Body Structure affected due to collision

Date / Time:

Action / Instruction

49 \$760.00

CAV: \$1,692.02 (65%)

AXA  
41

Claim/Time: For Pass in?

☐

Prel. Report

II

☐

Final Report

Claim/Time: For Return in?

II

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

Report Format:

Lump Sum / I.B.T. is

Add Fee:

☐

Site trip (S)

☐

Interview (S)

☐

Tech. Visit (S)

☐

Witnessing (S)



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM18013833/K1ub3

8 SHENTON WAY #24-01  
AXA TOWERSINGAPORE 068811

Date : 30-07-2018



Code : ASM

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJK 6191R	Veh. Inspected	SH 8097B
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	30/07/2018

## 2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

## 4. Description of Damages

--	--

## 5. General Information

Accident Date	27/07/2018	Inspection Date	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

# COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SH 8097B

DATE 30/7/2018 9:56

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Bumper Protector (LH/RH)		\$ 38.00	\$ 76.00
	<b>SUB TOTAL</b>			<b>\$ 1,482.90</b>
	<b>LESS 20%</b>			<b>\$ 296.58</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,186.32</b>
	Rear Bumper Reverse Sensor			\$ 135.70
	Rear Bumper Advertisement Logo			\$ 50.00
				<b>\$ 185.70</b>
	<b>Labour Charge</b>			<b>20%</b>
	Panel Beating			\$ <del>350.00</del>
	Spray Painting Charge			\$ <del>280.00</del>
	Wiring Charge			\$ <del>50.00</del>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del>
	<b>TOTAL LABOUR</b>			<b>\$ 770.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,142.02</b>

Nett

Nett

20%

20%

X on

40

Ka hi 10000  
30/7/18 1416h  
2 Pm  
4/3  
After Repair

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during survey
- Parts prices are subject to confirmation
- Third party liability & on a "best price" basis
- No legal responsibility allowed
- Supplemental charges must be included and is subject to insurance claim liability by Company

Acknowledged by Repairer

Signature:

Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305193498  
Date : 31.07.2018

ComfortDelGro Engineering Pte Ltd  
59 Layang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SH 8097B

Date of Accident : 27.07.2018

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: AXA -- SJK6191R
2. The finalized amount shall be:
 

(a) Spare Parts after List discount		\$0.00
(b) Labour Charges		\$0.00
<b>Total for Part-By-Part Repair Cost</b>		<b>\$0.00</b>
(c) Lumpsum Repair (if applicable)		
Total for Lumpsum repair cost after Less:	20%	\$750.00
<b>Final Lumpsum Repair cost</b>		<b>\$750.00</b>

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : Kalvin

Date : 31/7/18

## For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

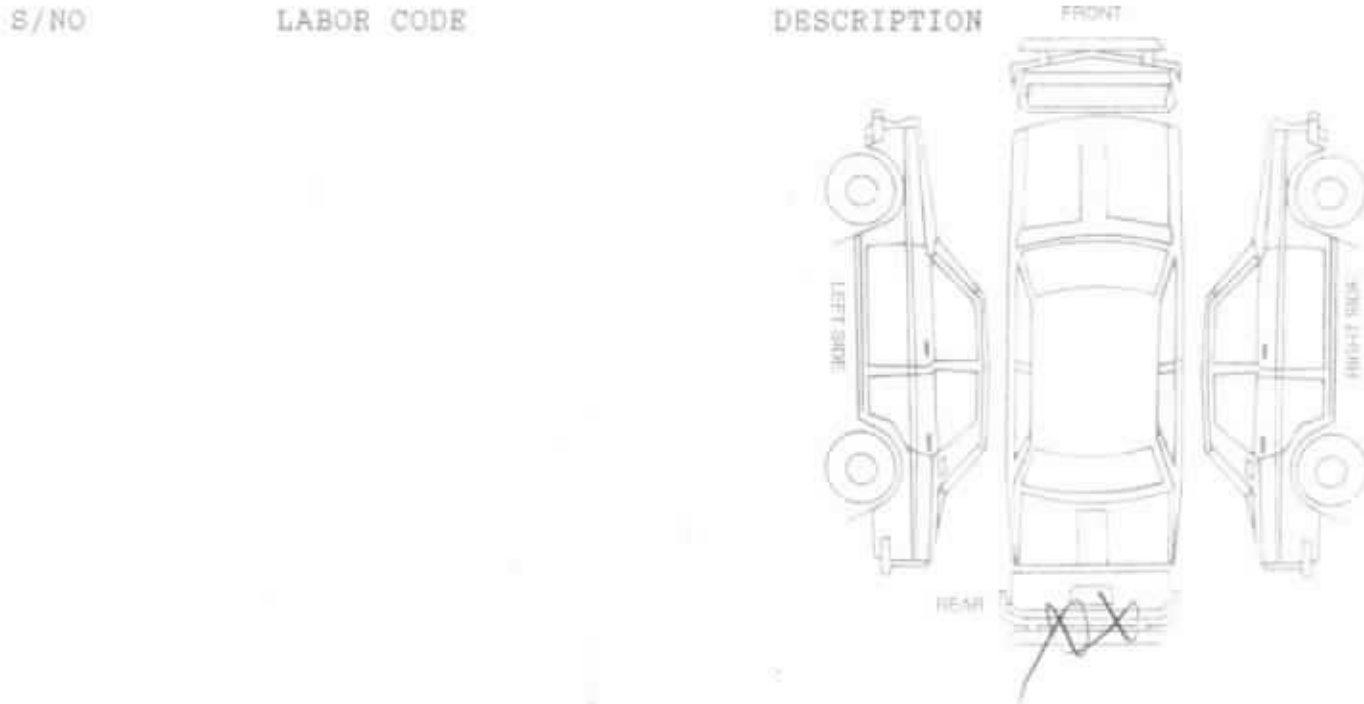
Remarks:

*Final Amount Subject to Insurer Approval*

Team: ARC Repair TP(CLS0)1 JOB CARD Sales Order: JC NO.: 305193498

OWNER S OWNER NO ESS (R) (P) IDENT CARD NO	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755	REG NO. SH 8097B MAKE HYUNDAI MODEL SONATA YR OF MANF 11.07.2013 CHASSIS CODE RMHET41VMDA835339	MILEAGE FUEL E 1/2 F DATE/TIME IN 28.07.2018 10:40 TARGET DATE COMPLETION DATE/TIME
--	---	--	---

Accident Date: 27.07.2018  
NATURE: 3P 27.07.18



KEYED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Identification Slip	Exit Pass
Vehicle No: SH 8097B PZ AXA	Vehicle No: SH 8097B
Signature/Date	Name of Service Advisor Date
turned to Service Reception upon collection	To be kept by Security Guard

## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SH 8097B

DATE 30/7/2018 9:56

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper			\$ 578.40	
	Rear Bumper Reinforcement			\$ 483.30	
	Rear Bumper Clip			\$ 22.00	
	Rear Bumper Sponge			\$ 137.40	
	Rear Bumper Under Cover			\$ 185.80	
	Rear Bumper Protector (LH/RH)		\$ 38.00	\$ 76.00	
	<b>SUB TOTAL</b>			<b>\$ 1,482.90</b>	
	<b>LESS 20%</b>			<b>\$ 296.58</b>	
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,186.32</b>	
	Rear Bumper Reverse Sensor			\$ 135.70	Nett
	Rear Bumper Advertisement Logo			\$ 50.00	Nett
				<b>\$ 185.70</b>	
	<b>Labour Charge</b>				
	Panel Beating			<del>\$ 350.00</del>	20%
	Spray Painting Charge			<del>\$ 250.00</del>	20%
	Wiring Charge			<del>\$ 50.00</del>	X
	Remove/Refix Reverse Sensor			<del>\$ 120.00</del>	30%
	<b>TOTAL LABOUR</b>			<b>\$ 770.00</b>	
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,142.02</b>	
<p> <i>Kokki 1000</i>  <i>30/7/18 14:00h</i>  <i>2 Prs</i>  <i>4/3</i>  <i>After Repair</i> </p> <div data-bbox="827 1473 1364 1921" data-label="Text"> <p>LKK Auto Consultants hereby notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>To resurvey before starting work</li> <li>To display damaged parts during survey</li> <li>Parts prices are subject to insurance</li> <li>Third party claims will be made by the insurer</li> <li>No illegal repairs to be carried out</li> <li>Supplementary work must be approved and is subject to prior approval from insurance company</li> </ul> <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> </div>					
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.					

Our Ref : T 0718/ SH8097B /WT(ck)

Your Ref :

Date : 08-Aug-18

CDGE Taxi Claims Dept

59 Loyang Drive 4th Flr

Singapore 508969

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Mainline +65 6383 6280

Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198004400

Workshops

Braddell

205 Braddell Road  
Singapore 579701

Loyang

59 Loyang Drive  
Singapore 508969

Sin Ming

353 Sin Ming Drive  
Singapore 575717

Pandan

45 Pandan Road  
Singapore 608286

Ubi

320 Ubi Road 3  
Singapore 408649

Senoko

24 Senoko Loop  
Singapore 758156

Sungei Kadut

7 Sungei Kadut Way  
Singapore 725791

Yishun

501 Yishun Industrial Park A  
Singapore 765732

**AXA Insurance Pte Ltd**  
**8 Shenton Way**  
**#24-01, AXA Tower**  
**Singapore 068811**

**Attn : Motor Claims Department**

**WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SH8097B YOUR INSURED SJK6191R**  
**AND OTHER \_\_\_\_\_ ON 27.07.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SH8097B which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving SJK6191R we are submitting these claim for your consideration on behalf of the claimants.

## TAXI OWNER'S CLAIM

1	Cost of Repair	\$	802.50
2	4 days Loss of Rental @ \$ 115.00 per day	\$	460.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$	-
4	GIA / LTA Search Fee	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing Fees	\$	-
<b>Sub Total :</b>		<b>\$</b>	<b>1,269.99</b>

## HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$	320.00
<b>Total Claims:</b>		<b>\$</b>	<b>1,589.99</b>

We enclose herewith the following documents to support the claims: -

- Original repair bill and photocopies of photographs 9 pcs
- LTA search slip/s of : SJK6191R
- GIA / Police report/s of : SH8097B
- Letter of authority from owner / hirer / operator
  - ( ) Photocopies of Accident Scene Photo/s ( ) Traffic Compound ( ) PIR
  - ( ) Witness statement/s ( x ) Rental Rate letter ( x ) Downtime/Mileage record

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

*William Tan*

Deputy Manager

CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1843 Email: williamtan@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

**COMFORTDELGRO**





## Thin Thin (LKKAUTO)

---

**From:** Thin Thin (LKKAUTO)  
**Sent:** Monday, 5 November 2018 1:28 PM  
**To:** 'gina6611@hotmail.com'  
**Cc:** Admin A; Vic (LKKAUTO)  
**Subject:** ACCIDENT INVOLVING SJK 6191R AND SH 8097B ALONG SLE TOWARDS ANG MO KIO ON 27/07/2018



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

05 NOVEMBER 2018

**GINA TAN CHOR LENG**

Dear Sir/Madam,

OUR REF : CC4/ASM18013833/K1ub3  
YOUR REF : SJK 6191R

### **ACCIDENT INVOLVING SJK 6191R AND SH 8097B ALONG SLE TOWARDS ANG MO KIO ON 27/07/2018**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s **COMFORTDELGRO ENGINEERING PTE LTD** acting on behalf of the owner of **SH 8097B** against your motor insurance policy.

As spoken, basing on the circumstances of the accident reported by both parties (front-to-rear collision) where you had hit third-party vehicle from the rear, we are of the opinion that we cannot be absolved from liability.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [thinthin@lkkauto.com](mailto:thinthin@lkkauto.com) within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (if any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)

- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6841 2360 or email us at [thinthin@lkkauto.com](mailto:thinthin@lkkauto.com)

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely

THIN THIN HLAING  
LKK Auto Consultants Pte Ltd  
DID: 6841 2360  
FAX: 6741 4108  
Email: [thinthin@lkkauto.com](mailto:thinthin@lkkauto.com)

Cc *AXA Insurance Pte Ltd  
(Motor Claims Dept)*

## LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING  
ALONGSONATA SH8097B , SJK6191R  
SLE TWDS CTE BEFORE MANDAI EXIT

ON 27-Jul-18 14:25

I / We

SAMINATHAN S/O KAN... (Hirer) NRIC No.: S1433833J

and/or

(Relief) NRIC No.:

Taxi Number

SH8097B

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

28-Jul-2018

Name of Hirer

SAMINATHAN S/O KANNIAN

Hirer NRIC

S1433833J

Signature :



Address

435 BUKIT PANJANG RING ROAD #...  
670435

Contact No.

91829224



redefining / insurance

CLAIM REF : S8M00Q9F  
INSURED : TAN CHOR LENG

### DISCHARGE VOUCHER

We, **ComfortDelGro Engineering Pte Ltd** confirm that by letter of authorization dated 28/07/2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of Comfort Transportation Pte Ltd and the Hirer, SAMINATHAN S/O KANNIAN of vehicle no. SH 8097B.

Now we **ComfortDelGro Engineering Pte Ltd** for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars ONE THOUSAND THREE HUNDRED AND EIGHTY only (S\$ 1,380.00) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no (SJK 6191R) arising out of an accident with (SH 8097B) on 27/07/2018.
- declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SJK 6191R arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made in favour of **ComfortDelGro Engineering Pte Ltd** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SJK 6191R.

Dated this 16 day of November 2018

Signed by [Signature]  
(AUTHORISED SIGNATORY)

Company Stamp  
COMFORTDELGRO ENGINEERING PTE LTD  
89 LORONG DRIVE  
SINGAPORE 068811

Witness : \_\_\_\_\_  
Name : \_\_\_\_\_  
I/C No : \_\_\_\_\_  
Address : \_\_\_\_\_

Please forward your cheque made payable to:  
**COMFORTDELGRO ENGINEERING PTE LTD**

"The contents of this document apply to vehicle damages only  
All personal injuries and damages arising therefrom are excluded  
from the ambit and application of this document"

## TAX INVOICE

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01  
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO  
SH 80978

MAKE  
HYUNDAI

MODEL  
SONATA

DATE OF REG  
11.07.2013

CHASSIS CODE  
KMHRT41VMDA835339

NO/DATE  
91387354 31.07.2018

JOB NO.  
305193498

ODMETER READING

JOB TYPE

Description : 3P 27.07.18

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	750.00
Add GST @ 7.000 %	52.50
<b>Total Invoice amount</b>	<b>802.50</b>

Issued by : KATHKINTAN 01.08.2018 15:05:37  
Repair Type : CLSO/57/57  
Payment Type/Term : /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS, CREDIT AND RISK OF ACCIDENTAL DAMAGE AND CORROSION IS ENTIRELY THE RESPONSIBILITY FOR CARE OF OTHERS' PROPERTIES BELONGING TO CUSTOMERS AND SERVICE ARE PROVIDED ON THE BASIS OF OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLE IMMEDIATELY UPON DELIVERY AND REPORT ANY DAMAGE OR DEFECT TO THE COMPANY IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE WILL BE DEEMED TO BE IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OUTSTANDING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT. AFTER 30 DAYS FROM THE PRESENT DATE, THE PERIOD OF DEFAULT.

PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DEFECTS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd  
A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

Our Ref: CT18070813

Date: 01 August 2018



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      27/07/2018    @   14:25 hrs  
ALONG                              SLE TWDS CTE BEFORE MANDAI EXIT  
INVOLVING                      SJK6191R

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SH8097B** (the "Taxi"). The Taxi was hired to **SAMINATHAN S/O KANNIAN IC NO S1433833J** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$107.88** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay  
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

[illegible]

**Enquire Vehicle Insurer**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJK6191R	27 Jul 2018 / 14:25:00	Successful	A12	AXA INSURANCE PTE LTD

Previous OK



### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SH 8097B (Insd veh)	Model:	HYUNDAI SONATA
	SJK 6191R (TP veh)		
Date of Accident:	27/07/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	2,291.96
Final Repair Cost	:	\$	802.50
Loss of Token Sum	:	\$	200.00
Rental (if any)	:	\$	431.52
LTA / GIA Search Fee	:	\$	7.49

Others:	:	\$	0.00
---------	---	----	------

	:	\$	
Final Settlement Sum (Global Sum)	:	\$	1,380.00

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A) For Non GIA Registered Workshop: Agreed Liability \_\_\_\_\_ (%)

B) For GIA Registered Workshop: BOLA Applicable: Yes/ No BOLA Scenario No: \_\_\_\_\_  
 BOLA Liability: \_\_\_\_\_ 100 \_\_\_\_\_ (%) Assessed Liability (\*): \_\_\_\_\_ (%)  
*\* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.*

Remarks \_\_\_\_\_

Payment Instruction: Payee's Breakdown			
1)	COMFORTDELGRO ENGINEERING PTE LTD	:	\$ 1,380.00

JOANNE LEE KHANG MIN  
LKK Auto Consultants Pte Ltd

28/11/2018  
Date

Please attach all the supporting documents to the form.  
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM18013833/K1hb3q2

8 SHENTON WAY #24-01  
AXA TOWERSINGAPORE 068811  
ATTN: CYNTHIA LOH

Date : 28-11-2018



Code : ASM

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJK 6191R	Veh. Inspected	SH 8097B
Policy No.	GA179516/1	Coverage (\$)	0.00
Claim No.	S8M00Q9F	Excess (\$)	0.00
Assign From		Assign Date	30/07/2018

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	KMHET41VMDA835339	Colour	BLUE
Odometer	576568	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	215/60 R16	WEST LAKE	7 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

## 5. General Information

Accident Date	27/07/2018	Inspection Date	30/07/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
---

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
-------------------------------------	----------------

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 8097B**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER (CONSISTENT)	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT (CONSISTENT)	SERVICEABLE	483.30	-
1	REAR BUMPER CLIP (CONSISTENT)	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE (CONSISTENT)	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER (CONSISTENT)	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00 (CONSISTENT)	SERVICEABLE	76.00	-
	LESS 20% DISCOUNT		-296.58	-120.08
			1,186.32	480.32
<b>SPECIAL NETT ITEMS</b>				
1	REAR BUMPER REVERSE SENSOR (SN) (CONSISTENT)	SERVICEABLE	135.70	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN) (CONSISTENT)	NOT NECESSARY	50.00	-
			185.70	-
<b>LABOUR</b>				
	PANEL BEATING		350.00	200.00
	SPRAY PAINTING CHARGE		250.00	200.00
	WIRING CHARGE	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR		120.00	40.00
			770.00	440.00
<b>GRAND TOTAL</b>			<b>2,142.02</b>	<b>920.32</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>750.00</b>

Report Ref No. CC4/ASM18013833/K1hb3q2

**KALVIN ANG WEI KUN**

Automotive Assessor / Investigator

**HO LEONG CHUAN**

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

<< Service Request Details

Claim	SJA400QYF
Reference	CCA/ASM18013833/K1Hb3u2 
Loss Date	27 July 2018
Request Date	30 July 2018
Due Date	
Vendor Name	LKK AUTO CONSULTANTS PTE LTD (TTP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions

Next Steps

Wait for Approve Invoice

Add Remarks

Vehicle Information	
Incident Vehicle Registration #	SH80978
Make	TPVD HYUNDAI
Model	SONATA-2.0 (A)
Service Address	
...	
Primary Contact/Insured	
TAN CHOR LENG BLK 248 #04-490, CHOA CHU KANG AVENUE 2, 680248, Singapore ginad6611@hotmail.com	
Claim Handler	
LOH Cynthia 6568804843 cynthia.loh@axa.com.sg	

Additional InstructionsINSD GIA NOT REPORTED

MessagesInvoicesHistoryDocumentsAssessmentMetricsNotes

Document TypeDocument SubType

+ Upload Documents

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 Accident Statement	Reports & Statement		Morimen	



NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LKX REINSPECTION PHOTOS.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	21 November 2018
 TP LOD.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	21 November 2018
 Email to CII dd 051118.pdf	Letters and Correspondence	Policy Holders / Insured	LKX AUTO CONSULTANTS PTE LTD (TP)	21 November 2018
 Immediate Advice.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	13 November 2018
 TP GIA.PDF	Reports & Statement	GIA Report	LOH Cynthia	20 August 2018
 Non reporting letter.pdf	Letters and Correspondence	Policy Holders / Insured	LKX AUTO CONSULTANTS PTE LTD (TP)	6 August 2018
 TP ESTIMATE- MARKED.pdf	Reports & Statement	Estimate / Quotation	LKX AUTO CONSULTANTS PTE LTD (TP)	31 July 2018
 TP PBI FROM WORKSHOP WITH GIA AND ESTIMATE.png	Letters and Correspondence	Workshop	DHAMAL Baghee	30 July 2018